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8 INTUSCARE INC.

9 UNITED STATES DISTRICT COURT
10 NORTHERN DISTRICT OF CALIFORNIA

11
12 INTUSCARE INC.,

13 Plaintiff,

14 v.

15 RTZ ASSOCIATES, INC.; and DOES 1
through 10,

16 Defendants.

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FILED UNDER SEAL

Case No. 4:24-cv-1132-JST

Assigned to: Hon. Jon S. Tigar

**PLAINTIFF INTUSCARE INC.'S
REPLY IN SUPPORT OF MOTION
FOR PARTIAL SUMMARY
JUDGMENT**

Date: June 26, 2025
Time: 2:00 p.m.
Courtroom: 6

Complaint Filed: February 23, 2024
Amended Complaint Filed: April 2, 2024
Counterclaims Filed: June 20, 2024

1 **I. INTRODUCTION**

2 RTZ Associates Inc.’s (“RTZ”) Opposition is rife with irrelevant innuendo and accusations.
 3 As RTZ tells it, it is actually IntusCare Inc.’s (“Intus”) fault that RTZ is blocking Intus from
 4 accessing electronic health information (“EHI”) stored on RTZ’s PACECare platform.
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8 [REDACTED] The facts here are clear and
 9 undisputed: RTZ is an “Actor” under the Cures Act; as an Actor it has to provide Intus access to
 10 health information on its PACECare platform, and RTZ failed to provide access. This violates the
 11 Cures Act. Intus’ motion should be granted.

12 On the merits of Intus’ information blocking claim, RTZ has no meaningful response. There
 13 are only two elements of an information blocking claim. First, a party must be a health IT developer
 14 subject to the Cures Act. This is referred to as an “Actor” in the regulations and guidance. Second,
 15 the “Actor” must be engaged in a practice that “is likely to interfere with access, exchange or use
 16 of EHI.” RTZ does not dispute that it is an Actor. It is also undisputed that RTZ has blocked Intus
 17 from accessing PACECare, preventing Intus from gathering EHI to provide critical analytics work
 18 to PACE Programs. RTZ makes a few nonsensical arguments to avoid the obvious conclusion that
 19 precluding Intus access to PACECare is a practice that “is likely to interfere with access, exchange
 20 or use of EHI.” As discussed herein, all those arguments fail.

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 27 [REDACTED] RTZ’s arguments are off base
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1 and entirely miss the point of why the information blocking statute exists. There is no NDA or
 2 consent requirement in the Cures Act, nor is there an NDA exception. Indeed, the point of the
 3 information blocking rules is to prevent companies in RTZ's position from imposing limitations on
 4 access to health information. So, RTZ's argument that it is permitted to block access because Intus
 5 did not consent or Intus did not meet RTZ's conditions turns the Cures Act on its head. It is precisely
 6 because companies in RTZ's position were imposing requirements on information access for
 7 business or competitive reasons that the Cures Act exists. It is because RTZ is blocking access due
 8 to its self-imposed consent and NDA requirements that this motion should be granted and RTZ's
 9 barriers removed. To reach any other conclusion would undermine the entire purpose of the
 10 information blocking rules.

11 Unable to seriously dispute the legal merits of Intus' information blocking claim, RTZ
 12 attempts to invoke two exceptions under the Cures Act. As a preliminary matter, RTZ does not
 13 dispute that the burden to establish the exceptions rests with RTZ. RTZ does not come close to
 14 meeting its burden as to either exception. As to the Manner Exception, RTZ is wrong on the law.
 15 The Manner Exception does not apply anytime the parties cannot reach agreement on terms of
 16 access unilaterally dictated by the data provider. Far from it, the Manner Exception applies in a
 17 much narrower context than RTZ would have this Court believe. An Actor, like RTZ, is entitled to
 18 rely on the Manner Exception only where the requesting party, like Intus, seeks access to electronic
 19 health information in a novel, innovative, or non-standard manner that would cause the Actor
 20 considerable burden and expense. Thus, the exception relates to issues about actually transferring
 21 the data. And it is not a concern implicated here because Intus has not requested access in a non-
 22 standard manner. Indeed, it is undisputed that Intus was previously accessing PACECare to pull
 23 EHI. There is nothing in RTZ's Opposition that says that the way Intus was historically accessing
 24 data via an automated script caused any additional expense or burden for RTZ. Indeed, RTZ claims
 25 in its Opposition that it did not even know it was happening. RTZ cannot backdoor its
 26 impermissible consent and NDA requirements onto Intus via the manner exception. Moreover, RTZ
 27 does not even include its "standard" NDA in the record, let alone meet its burden to establish how
 28 its consent and NDA requirements have anything to do with the manner of access. The Infeasibility

1 Exception is also inapplicable. Again, Intus was previously accessing data stored on PACECare.
 2 There is plainly not a feasibility issue with how Intus was doing it.

3 RTZ has not demonstrated that there are triable issues of fact as to either the merits of Intus'
 4 information blocking claim or any exceptions. Summary judgement is, therefore, proper on the
 5 Unfair Competition Law claim premised on RTZ's violation of the information blocking statute.

6 **I. RTZ ENGAGED IN INFORMATION BLOCKING**

7 **A. RTZ's Attempts To Manufacture Factual Disputes Fail**

8 There are only eight material facts supporting Intus' Motion. RTZ only claims to dispute
 9 two of those eight facts. (Opp. p. 7). Not just any factual dispute will defeat summary judgment;
 10 rather, the factual dispute must pertain to *a material fact*. *See* Fed. R. Civ. P. 56(a). "A 'material'
 11 fact is one that could affect the outcome of the case under the governing substantive law." *Bangkok*
 12 *Broad. & T.V. Co. v. IPTV Corp.*, 742 F. Supp. 2d 1101, 1109 (C.D. Cal. 2010). The purported
 13 disputes are immaterial and/or based on a misreading of the fact at issue. There are no disputed
 14 issues of material fact.

15 RTZ takes issue with undisputed fact number 5. Fact 5 states "[f]rom approximately June
 16 2021 to September 2022, Intus obtained electronic health records data using automated scripts to
 17 extract the necessary data, with RTZ's knowledge." (Mot. 4:8-10.) RTZ does not dispute that it
 18 knew Intus was extracting data Intus needed for its work from PACECare. Rather, RTZ disputes
 19 only that it knew that Intus was using automated scripts. (Opp. 5:13-14; 7:24-26.) But, whether or
 20 not RTZ knew of the automated scripts is immaterial to this Motion. The key fact is that Intus was
 21 extracting data from PACECare and RTZ knew that was occurring, before RTZ pulled the plug and
 22 blocked Intus from access. Indeed, as discussed below, the fact that the use of an automated script
 23 was something that RTZ did not know about actually further supports summary judgment as it
 24 precludes RTZ from relying on the statutory exceptions. Thus, for purposes of this Motion, there is
 25 no dispute about whether RTZ knew that Intus was pulling data from PACECare using an
 26 automated script.

27 RTZ also takes issue with undisputed fact number 8. Fact 8 states that "since March 15,
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1 2024, due to RTZ’s information blocking practices, Intus has been completely locked out of access
 2 to PACECare and has had contracts terminated by five specific clients to whose information Intus
 3 previously had authorized access.” (Mot. 5:17-20.) RTZ claims that Intus did have some access to
 4 PACECare based on interrogatory responses. (Opp. 7:17-19.) RTZ appears to be misreading the
 5 fact being put forth and/or raising an immaterial issue. PACECare is client specific. The health care
 6 data for patients in one PACE Program stored in PACECare is not accessible by all PACE Programs
 7 that use PACECare. Fact 8 refers specifically to five Intus clients where Intus has been completely
 8 blocked from access and, as a result, Intus could not do its work and the Intus clients were forced
 9 to terminate the contracts. The fact that there are a few other Intus clients where Intus had some
 10 access to those clients’ EHI on those clients’ PACECare platform is irrelevant. RTZ is guilty of
 11 information blocking if it blocked Intus’ access to even one client’s data. There is no dispute that
 12 RTZ has completely blocked Intus’ access to at least some Intus clients since March 15, 2024. In
 13 addition, as discussed herein, RTZ violates the information blocking rules by engaging in a practice
 14 that “is likely to interfere with access, exchange or use of EHI.” Thus, while it is true that RTZ did
 15 completely block Intus from accessing PACECare for certain clients, that is not the standard.

16 Therefore, RTZ has not raised a genuine issue of material fact with respect to Fact 5 or 8.

17 **B. The Undisputed Facts Establish RTZ Violated the Information Blocking**
 18 **Provisions of the Cures Act**

19 RTZ does not dispute—or even address—that it is a “health information network or health
 20 information exchange,” under 45 C.F.R. § 171.102, and thus an “Actor” subject to the federal
 21 information blocking regulations. “[F]ailure to respond in an opposition brief to an argument put
 22 forward in an opening brief constitutes waiver or abandonment in regard to the uncontested issue.”
 23 *Stichting Pensioenfonds ABP v. Countrywide Fin. Corp.*, 802 F. Supp. 2d 1125, 1132 (C.D. Cal.
 24 2011); *Kroeger v. Vertex Aerospace LLC*, No. CV 20-3030-JFW(AGRX), 2020 WL 3546086, at
 25 *8 (C.D. Cal. June 30, 2020) (holding that a party conceded argument by failing to address it in the
 26 opposition brief and collecting cases holding the same). RTZ has, therefore, conceded that it is an
 27 “Actor” governed by the provisions of the Cures Act.

28 RTZ also does not dispute that it is not permitting Intus to access PACECare for Intus’

1 clients. (Opp. 3:19-20 [“Intus has never obtained an NDA from RTZ. It is therefore not permitted
 2 to access PACECare without RTZ’s consent.”].) Nor has RTZ disputed that it engages in practices
 3 such as including provisions in contracts that preclude Intus’ clients from granting access to Intus
 4 (UMF 6) and that it has taken steps to enforce those provisions (UMF 7). Thus, is cannot be disputed
 5 that RTZ is engaging in at least a practice that “is likely to interfere with access, exchange or use
 6 of EHI.” (cite statute). RTZ has violated the Cures Act.

7 RTZ attempts to justify its illegal behavior with a handful of misguided arguments. First,
 8 RTZ claims that the Cures Act does not require access to “software,” only data. (Opp. 9:12-13.)
 9 The argument makes little sense. There is no claim that Intus’ automated script pulls aspects of
 10 PACECare’s software. It pulls data stored on PACECare.

11 Second, RTZ argues that it was entitled to block Intus from accessing its clients’ EHI
 12 because the parties could not agree on an NDA. (See, e.g., Opp. 11:13-14 [“RTZ has merely insisted
 13 on the execution of an NDA to access PACECare.”].) [REDACTED]

14 [REDACTED]
 15 [REDACTED] But this
 16 argument finds no support in the Cures Act or in any other law—indeed, RTZ has not cited any
 17 authority for this position. Indeed, the fact that RTZ is putting up such roadblocks and requiring
 18 that it “consent” or demand an unidentified “NDA” is why RTZ is violating the Cures Act. It does
 19 not excuse RTZ’s conduct. There is no “NDA Exception” in the information blocking provision of
 20 the Cures Act. Nor is there anything in the plain language of the statute allowing an Actor to impose
 21 unilateral conditions to access. The Cures Act is clear: “Information blocking means a practice that
 22 . . . is likely to interfere with access, exchange, or use of electronic health information.” 45 C.F.R.
 23 § 171.103(a). To contend, as RTZ does, that Intus “was merely an NDA away from obtaining the
 24 access it sought,” defeats the purpose of the Cures Act. (Opp. 11:23.) By arguing that it can
 25 withhold access until another party agrees to conditions and the Actor’s consent, RTZ is reading a
 26 provision into the Cures Act that does not exist. The Court should decline this invitation and reject
 27 the argument that RTZ was authorized to block Intus’ access to EHI because of the lack of an
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1 NDA.¹ “Courts are not authorized to rewrite a statute because they might deem its effects
 2 susceptible of improvement.” *Badaracco v. Comm'r*, 464 U.S. 386, 398 (1984).

3 Third, RTZ argues that it is really not interfering with Intus’s access to data because Intus
 4 could have simply asked its clients to provide their data from PACECare through a feature known
 5 as the Custom Export Report. (Opp. 12:14-16.) According to RTZ, “the Cures Act does not require
 6 . . . access to [] PACECare software. It merely ensures that there is access to data.” (Opp. 9:12-13)
 7 (emphasis in original). Not so. The Cures Act defines interference as a practice that “prevent[s],
 8 *materially discourage[s], or otherwise inhibit[s]* access. 45 C.F.R. § 171.102 (emphasis added).
 9 Further, the United States Department of Health and Human Services, Office of the National
 10 Coordinator for Health Information Technology (“ONC”) implemented information blocking
 11 regulations to avert the use of “practices that *increase the cost, complexity, or other burden*
 12 associated with accessing, exchanging, or using electronic health information.” 21st Century Cures
 13 Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program, 85 Fed.
 14 Reg. 25642, 25809 (June 30, 2020) (codified at 45 C.F.R. §§ 170, 171) (emphasis added). The
 15 statute was enacted to remove the type of burden that RTZ is creating by cutting Intus off from
 16 PACECare. Moreover, RTZ cannot circumvent its statutory obligations to not interfere with Intus
 17 accessing data by claiming that Intus can ask someone else for a different set of data. This position
 18 is also inconsistent with what RTZ put in its contracts.

19 [REDACTED]

20 [REDACTED]

21 RTZ also argues that Intus has not offered any evidence to substantiate its argument that the
 22 process of going individually through each of its clients to access their EHR, as opposed to
 23 accessing PACECare, imposes a burden. (Opp. 12:26 [“Intus’s Motion is devoid of any evidence
 24 substantiating this so-called ‘burden’”].) Under the statute, it is not Intus’ burden to establish that

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26 ¹ Equally unavailing is the argument that Intus failed to “establish[] why RTZ’s offered NDA was
 27 unacceptable or unreasonable” or explain “how RTZ’s NDA is offensive.” (Opp. 10:7-9.) RTZ is
 28 essentially litigating the merits of the NDA here, which is irrelevant. RTZ was never entitled to
 hold Intus clients’ data hostage pending an NDA, so it does not matter what the reasons were that
 the parties never agreed to an NDA.

1 RTZ's proposed alternative would be burdensome. RTZ has to provide the access in the manner
 2 requested, unless RTZ can show that the request is a non-standard or novel such that complying
 3 with the manner requested would sap RTZ's resources. As discussed below, RTZ cannot establish
 4 the exception. Moreover, RTZ is not even correct. Intus attached the declaration of its CEO Robbie
 5 Felton who stated that "due to RTZ's information blocking practices, Intus has been completely
 6 locked out of access to PACECare and has had contracts terminated by five specific clients to whose
 7 information Intus previously had authorized access." (Declaration of Robbie Felton in Support of
 8 Motion for Partial Summary Judgment, "Felton Decl.", ¶ 16.) This is competent evidence from the
 9 founder and highest ranking executive at Intus. Not only has RTZ failed to attack this evidence as
 10 reliable (it cannot), but it has also failed to include a shred of evidence contradicting this fact.²

11 Fourth, RTZ also contends that it did not violate the Cures Act because it did not block *all*
 12 of Intus' access to PACECare. According to RTZ, the loss of "'all access' is what drove the [Real
 13 Time Medical Systems court's] determination that information blocking had occurred." (Opp.
 14 11:20-21.) RTZ is wrong. First, as noted above, RTZ has blocked "all access" to certain Intus
 15 Clients' PACECare platform. Moreover, it cannot be the case that RTZ is not guilty of information
 16 blocking because Intus might be able to access some clients' PACECare, but not others. RTZ would
 17 have this Court believe that only when an Actor blocks *all access* to EHI can it be held liable for
 18 information blocking. That is not the law. There is nothing in the Cures Act that defines information
 19 blocking as a barrier to *all access*. Indeed, the language of the regulations states the opposite. As
 20 above, they speak to any practice that "is likely to interfere with access, exchange or use of EHI."
 21 Nothing in the regulation speaks to a loss of all access. If this Court were to adopt RTZ's

22 ² RTZ makes a half-hearted attempt to argue that one of the clients that cut ties with Intus did so
 23 because of some alleged misrepresentation Intus made. This argument fails for two reasons. First,
 24 the notion that this client left because Intus allegedly lied to the client about its affiliation with
 25 TRHC is pure speculation. There is not an iota of competent testimony that this client left Intus
 26 because of some alleged misrepresentation. "[C]onclusory and speculative testimony does not
 27 raise genuine issues of fact and is insufficient to defeat summary judgment." *Krommenhock v.*
Post Foods, LLC, 334 F.R.D. 552, 568 (N.D. Cal. 2020) (citing *Thornhill Pub. Co. v. Gen. Tel. &*

28 *Elecs. Corp.*

, 594 F.2d 730, 738 (9th Cir. 1979).) Second, even assuming this client left for
 reasons other than the information blocking (it did not), that does not undermine Intus' Motion
 for Partial Summary Judgment on the UCL claim because there are at least four other clients who
 did leave once RTZ denied Intus access to their data.

1 unsupported position, it would be giving all Actors an end-run around the protections of the Cures
 2 Act. Any Actor could give minimal access and claim that because it had not blocked *all access*, it
 3 was not in violation of the Cures Act.

4 Fifth, RTZ presents the court with what it terms “a perilous slippery slope,” arguing that
 5 any “party such as Intus can merely reject an NDA to trigger [an] ‘information blocking’ claim.”
 6 (Opp. 10:14-15.) But this argument flips the Cures Act on its head. The presumption under the
 7 Cures Act is that Actors allow access to EHI without imposing unnecessary hurdles. By imposing
 8 an NDA and consent obstacle—and trying to pass it off as a legitimate basis to violate the statute—
 9 RTZ is perverting the aims of the Cures Act. To borrow a phrase from RTZ, “This proposition
 10 creates a dangerous precedent.”

11 **C. RTZ’s Reliance On The Cures Act Exceptions Is Unavailing**

12 RTZ’s reliance on the Cures Act exceptions fares no better than its argument on the merits
 13 of the information blocking claim. “[E]ach exception is intended to be tailored, through appropriate
 14 conditions, so that it is limited to the reasonable and necessary activities that it is designed to
 15 exempt.” 21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT
 16 Certification Program, 85 Fed. Reg. 25642, 25794 (June 30, 2020) (codified at 45 C.F.R. §§ 170,
 17 171); *see also*, *id.*, at 25820 (“We emphasized that the exceptions would be subject to strict
 18 conditions to ensure that they do not extend protection to practices that raise information blocking
 19 concerns.”). RTZ does not dispute that it is RTZ’s burden to establish that any of the exceptions
 20 apply. *See Real Time Med. Sys., Inc. v. PointClickCare Techs., Inc.*, 131 F.4th 205, 231 (4th Cir.
 21 2025) (holding that it is the defendant’s burden to establish that an exception applies).

22 The first exception RTZ invokes is the Manner Exception, which provides that “An actor
 23 must fulfill a request for electronic health information in any manner requested, unless the actor is
 24 technically unable to fulfill the request or cannot reach agreeable terms with the requestor to fulfill
 25 the request in the manner requested.” 45 C.F.R. § 171.301(a)(1). RTZ does not contend that it was
 26 “technically unable to fulfill” Intus’ request for access in the manner Intus requested; instead, it
 27 argues that it “did not reach agreement about the terms of Intus’ access rights to obtain data.” (Opp.
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1 15:22-23.) But the Manner Exception does not categorically apply any time the parties fail to reach
 2 agreement about the terms of access unilaterally dictated by the Actor. If that were the case, any
 3 Actor could impose whatever draconian terms it deemed fit and then invoke the Manner Exception
 4 to block access when the requesting party refused to kowtow to the terms.

5 Contrary to RTZ's untenable interpretation, the Manner Exception applies in a far narrower
 6 set of circumstances: Where the requesting party requests access in a novel or innovative manner,
 7 and the parties cannot reach an agreement "to fulfill the request *in the manner requested.*" 45 C.F.R.
 8 § 171.301(a)(1). Indeed, in the final rule to amend the information blocking regulations, the Office
 9 of the National Coordinator for Health Information Technology (ONC) explained that the Manner
 10 Exception was added to address a concern from Actors that they would be "engaging in information
 11 blocking if they decline demands from requestors for *non-standard, non-scalable, solutions that*
 12 *they do not currently support.*" Health Data, Technology, and Interoperability: Certification
 13 Program Updates, Algorithm Transparency, and Information Sharing, 88 Fed. Reg. 23746, 23868
 14 (April 18, 2023) (emphasis added). Put differently, the Manner Exception was addressed to
 15 situations where the manner requested would put a significant burden on the Actor. Specifically,
 16 the exception was "necessary to ensure actors reasonably allocate resources toward interoperable,
 17 standards-based manners *rather than allowing requestors who, for whatever reason, do not build*
 18 *their products for compatibility with open consensus standards or other industry standards to*
 19 *attempt to force use of non-standard, non-scalable solutions* by simply refusing to accept access,
 20 exchange, or use of EHI in any other manner." *Id.* (emphasis added). In short, the manner exception
 21 relates to technical issues for access and relieves an Actor from having to bear expenses or a heavy
 22 burden related to access.

23 Understood in its proper context, the Manner Exception is not implicated here. Intus has not
 24 requested access in a novel, non-standard, or non-scalable manner. Indeed, far from imposing any
 25 burden on RTZ, RTZ admits that it was not even aware that Intus was running automated scripts to
 26 secure needed data. (Opp. 19:1-3.) Moreover, RTZ does not even attach the "standard NDA," let
 27 alone explain how it has anything to do with the manner in which Intus is accessing its clients' data
 28 on PACECare. Therefore, RTZ cannot avail itself of this exception as a matter of law, and there is

1 no triable issue of fact as to the Manner Exception.³

2 The second exception RTZ relies on, the Infeasibility Exception, is also inapplicable here.
 3 The Infeasibility Exception provides that “[a]n actor’s practice of not fulfilling a request to access,
 4 exchange, or use electronic health information due to the infeasibility of the request will not be
 5 considered information blocking when the practice meets one of the conditions in paragraph (a) of
 6 this section and meets the requirements in paragraph (b) of this section.” 45 C.F.R. § 171.204. First,
 7 it is not disputed that Intus previously had access to data stored on PACECare. (UMF 5). Thus, it
 8 is plainly not “infeasible” for Intus to be given access. Second, the only “condition” that RTZ
 9 invokes is that the “Manner Exception [was] exhausted,” referring back to Section 171.301. *Id.* §
 10 171.204(a)(4). As explained, the Manner Exception is not applicable here, so the Infeasibility
 11 Exception that RTZ has invoked—which necessarily rises and falls with the Manner Exception—
 12 is also unavailable. (Opp. 17:12-14 [conceding that the Infeasibility Exception is contingent on the
 13 Manner Exception: “With respect to Condition (4)(i), *as with the Manner exception*, RTZ and Intus
 14 were unable to reach agreement about the terms of Intus’s access rights to PACECare.”]) (emphasis
 15 added).

16 RTZ has not demonstrated a triable issue of fact as to any Cures Act exceptions.

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22 ³ Because RTZ is not entitled to rely on the Manner Exception, it does not matter that RTZ
 23 purportedly arranged for “alternative means of fulfilling Intus’s request for direct access” through
 24 PACECare’s “Custom Export Report function.” (Opp. 16:1-2.) The “alternative means” provision
 25 is only triggered once the Actor proves eligibility under the Manner Exception, which RTZ has
 26 not shown here. *See Real Time Med. Sys., Inc. v. PointClickCare Techs., Inc.*, 131 F.4th 205, 232
 27 (4th Cir. 2025) (“If an actor does not fulfill a request for electronic health information in any
 28 manner requested because it” successfully invokes § 171.301(a)(1), “the actor must fulfill the
 request in an alternative manner,” as defined in § 171.301(b)(1). *Id.* § 171.301(b).”) (internal
 quotation marks omitted). Moreover, as described above, RTZ cannot shift its obligations to
 provide access to Intus on to another party. Thus, they have not provided an alternative means for
 Intus to access the data on PACECare.

II. CONCLUSION

For the foregoing reasons, this Court should grant Intus' motion for partial summary judgment.

Dated: May 9, 2025

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